

Substitute for Form 1449 A & B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

Complete if Known

Application Number	10/584,951
Confirmation Number	2242
Filing Date	September 13, 2006
First Named Inventor	Atsuro NAKAZATO
Art Unit	1614
Examiner Name	not yet assigned
Attorney Docket Number	Q95798

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document
		Number	Kind Code ² (if known)		
/SM/		US 6,187,781		02-13-2001	NAKAZATO et al.
/SM/		US 6,600,038		07-29-2003	NAKAZATO et al.
/SM/		US 6,852,732		02-08-2005	NAKAZATO et al.
/SM/		US 2005/0209253	A1	09-22-2005	NAKAZATO et al.
		US			
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FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Translation ⁴
		Country Code ³	Number ⁴	Kind Code ² (if known)			
/SM/		WO	02/02349	A1	01-10-2002	Taisho Pharmaceutical Co.	
/SM/		WO	2004/058767	A1	07-15-2004	Taisho Pharmaceutical Co.	
/SM/		WO	2005/066142	A3	07-21-2005	Taisho Pharmaceutical Co.	X
/SM/		WO	2005/066178	A1	07-21-2005	Taisho Pharmaceutical Co.	
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/SM/		WO	2005/085253	A1	09-15-2005	Taisho Pharmaceutical Co.	
/SM/		WO	2006/001501	A1	01-05-2006	Taisho Pharmaceutical Co.	
/SM/		WO	2006/001511	A1	01-05-2006	Taisho Pharmaceutical Co.	X
/SM/		WO	98/42699	A1	01-10-1998	Taisho Pharmaceutical Co.	X
/SM/		WO	00/53604	A1	09-14-2000	Taisho Pharmaceutical Co.	X

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	Translation ⁶

Examiner Signature

/Susanna Moore/

Date Considered

09/14/2008

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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